



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(571) 273-2885or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

34036 7590 08/08/2005

SILICON VALLEY PATENT GROUP LLP  
2350 MISSION COLLEGE BOULEVARD  
SUITE 360  
SANTA CLARA, CA 95054

11/14/2005 MBELETE2 00000055 10767680

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

|                  |                    |
|------------------|--------------------|
| David E. Steuber | (Depositor's name) |
| David E. Steuber | (Signature)        |
| 11/7/05          | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10767,680       | 01/28/2004  | Richard K. Williams  | AAT007-5C US        | 7095             |

TITLE OF INVENTION: MODULAR BIPOLAR-CMOS-DMOS ANALOG INTEGRATED CIRCUIT AND POWER TRANSISTOR TECHNOLOGY

| APPLN. TYPE    | SMALL ENTITY      | ISSUE FEE               | PUBLICATION FEE | TOTAL FEE(S) DUE         | DATE DUE   |
|----------------|-------------------|-------------------------|-----------------|--------------------------|------------|
| nonprovisional | <del>YES</del> NO | <del>\$700</del> \$1400 | \$300           | <del>\$1000</del> \$1700 | 11/08/2005 |

| EXAMINER           | ART UNIT | CLASS-SUBCLASS |
|--------------------|----------|----------------|
| WILCZEWSKI, MARY A | 2822     | 438-450000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Silicon Valley Patent  
Group LLP  
2  
3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Advanced Analogic  
Technologies, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Sunnyvale, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached. any underpayment
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2263 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☒ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature David E. SteuberDate 11/7/05Typed or printed name David E. SteuberRegistration No. 25,557

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

|                     |                     |
|---------------------|---------------------|
| Application Number  | 10/767,680          |
| Filing Date         | 01/28/2004          |
| First Inventor      | Richard K. Williams |
| Confirmation No.    | 7095                |
| Group Art Unit      | 2812                |
| Examiner Name       | Mary A. Wilczewski  |
| Attorney Docket No. | AAT007-5C US        |

Total Number Of Pages In This Submission

6

**ENCLOSURES (check all that apply)**

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form   | <input type="checkbox"/> Assignment Papers<br>(for an Application)   | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input type="checkbox"/> Fee Attached)   | <input type="checkbox"/> Drawing(s)  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input type="checkbox"/> Amendment / Reply   | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition  | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declarations   | <input type="checkbox"/> Petition to Convert to a Provisional Application  | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Power of Attorney, Revocation of Previous Powers; And Statement Under 37 CFR 3.73(b)    | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):               |
| <input type="checkbox"/> Express Abandonment Request   | <input type="checkbox"/> Terminal Disclaimer   | Return Receipt Postcard   |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> Request for Refund  | Credit Card Payment Form  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> CD, Number of CD(s) _____   | Letter Accompanying Payment Of Issue Fee  |
| <input type="checkbox"/> This is a Response to Missing Parts/ Incomplete Application under 37 CFR 1.52 or 1.53 | <b>Remarks</b><br>Please charge Deposit Account 50-2263 for any additional fee due or any underpayment of a fee. |   |
| <input type="checkbox"/> Copy of Notice To File Missing Parts (2 pages)  |  |   |

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

|                         |   |
|-------------------------|---|
| Firm or Individual Name | David E. Steuber (Reg. No. 25,557)<br>Silicon Valley Patent Group LLP<br>2350 Mission College Boulevard, Suite 360<br>Santa Clara, California 95054 |
| Signature               |   |
| Date                    | 11/07/2005  |

**CERTIFICATE OF MAILING BY "FIRST CLASS"**

I hereby certify that this paper or fee is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the below date.

  
David E. Steuber11/07/2005  
Date

urden Hours Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Arlington, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

|                           |   |                  |                    |
|---------------------------|---|------------------|--------------------|
| Appl. No.                 | 10/767,680  | Confirmation No. | 7095               |
| First Inventor            | Richard K. Williams   | Filing Date      | 1/28/2004          |
| Tech. Center/<br>Art Unit | 2812  | Examiner         | Mary A. Wilczewski |
| Title:                    | Modular Bipolar-CMOS-DMOS Analog Integrated Circuit And<br>Power Technology |                  |                    |
| Docket No.:               | AAT007-5C US  | Customer No.:    | 34036              |

Santa Clara, California  
November 7, 2005

Mail Stop Issue Fee  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

**LETTER ACCOMPANYING PAYMENT OF ISSUE FEE**

Dewar Sir:

In this application, the Notice of Allowance was mailed on the same day (08/08/2005) on which the Applicant submitted a Preliminary Amendment, an Information Disclosure Statement, and a Submission of Formal Drawings.

The Preliminary Amendment added Claims 2-17. Claim 1, which is allowed, was not amended. Claims 2-12 depend from Claim 1. Claim 13 is independent and Claims 14-17 depend from Claim 13.

Applicant's attorney has discussed this situation with the Examiner by telephone on several occasions. His understanding is that the Examiner will consider Claims 2-17. Claims 2-12 should be allowable by virtue of their dependency on Claim 1. If Claims 13-17 are also allowable, a Supplemental Notice of Allowance will be issued covering Claims 1-17.

If Claims 13-17 are not allowable, the Examiner agreed to telephone the Applicant's attorney to give him an opportunity to cancel those claims by telephone so that this case can proceed to issuance with minimal delay.

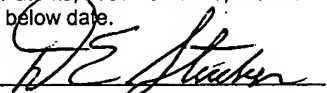
As indicated above, the 08/08/2005 filing also included an Information Disclosure Statement and a Submission of Formal Drawings. Applicant requests that the prior art references listed in the Information Disclosure Statement be made of record in this application and that the formal drawings be included in any patent that issues from this application.

As a precaution, the Applicant is paying the Issue Fee with the understanding that this payment will be applied, if necessary, against any payment due under any future Notice of Allowance or Supplemental Notice of Allowance.


Should the Examiner have any questions concerning any of the foregoing matters, the Examiner is invited to call the undersigned at (408) 982-8201.

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 11/7/05  
Attorney for Applicant(s) Date of Signature

Respectfully submitted,

  
David E. Steuber  
Attorney for Applicant(s)  
Reg. No. 25,557